

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Lester Zalewski
Name

(2) 545 S Ft Laud Bch Blvd
Address (number and street)

Fort Lauderdale FL 33316

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate (office sought): Fort Lauderdale City Commissioner District II

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

OFFICE USE ONLY

2013 JAN 25 PM 12:50

CITY CLERK

(5) REPORT IDENTIFIERS

Cover Period: From 01 / 11 / 13 To 01 / 25 / 13 Report Type TR

☐ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary
Expenditures \$ 7,935.92

Transfers to Office
Account \$ _____

Total
Monetary \$ 7,935.92

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 10,000.00

(10) TOTAL Monetary Expenditures To Date

\$ 10,000.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☐ Individual (only for electioneering commun.) ☐ Treasurer ☐ Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

Lester Zalewski

☒ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lester Zalewski

(2) I.D. Number _____

(3) Cover Period 01 / 11 / 13 through 01 / 25 / 13

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
01 / 24 / 13	Ms. Walker 3420 N Lake Chicago Ill 60657		print		\$304.31
1					
01 / 24 / 13	Suntrust Bank P O BOX 622227 Orlando FL 32862		print		\$38.60
2					
01 / 24 / 13	Lester Zalewski 545 S Ft Lauderdale Bch Blvd Fort Lauderdale FL 33316		loan repay		\$7,593.00
3					
// /					
// /					
// /					
// /					
// /					